INFLUENCING PRESCRIBING IN ENGLISH PRIMARY CARE: FINDINGS FROM THE MANMED SURVEY

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OBJECTIVES: Over the last 3 decades, expenditure on medicines in the UK has increased in real terms by almost 5-fold and currently forms about 12% of all NHS expenditure. The MANMED (MANagement of MEDicines) survey was designed to explore how medicines are currently managed in the NHS in England. METHODS: In May 2001, a postal survey was sent to prescribing advisers and prescribing leads in 332 Primary Care Organisations (PCO) and to chief pharmacists at 275 NHS hospital Trusts (NHSTs). RESULTS: Sixty-six percent of PCOs and 57% of NHSTs responded to the MANMED survey. Most PCOs report quality of prescribing as their top priority, followed by budget adherence at both practice and PCO levels. Prescribing advisers offer an average of 6.6 forms of support (range: 3–9), including the review of prescribing patterns (95% of respondents), practice visits (95%), visits to individual GPs (92%), indicators of prescribing performance (92%) and prescribing newsletters (88%). PCOs are pursuing a wide range of prescribing initiatives, covering an average of 7 different therapeutic areas, including proton pump inhibitors (82%), antibacterials (76%), generics (76%) and statins (62%). National targets are the main driver for prescribing initiatives, but other key influences include inappropriate prescribing and clinical governance. Prescribing incentive schemes commonly include generics targets (81%), audits (64%) and reviews of repeat prescribing (58%). PCO involvement with secondary care varies: one third of PCO prescribing committees include a hospital pharmacist, and just 7% include a hospital consultant. However, evidence from the MANMED (NHST) survey suggests that most PCOs are represented on their local NHST Drug and Therapeutics committee. CONCLUSIONS: It would appear that while cost considerations are important, quality is perceived as the overriding principle on which PCO prescribing strategy is based. Multi-faceted prescribing support is widespread and national targets are the main factor influencing choice of therapeutic area for prescribing initiatives.

HEALTH POLICY—Healthcare Expenditure Studies

THE USE OF PATHOLOGY-RELATED PARAMETERS IN EXPLAINING THE VARIATION OF PUBLIC EXPENDITURES ON MEDICAL IMAGING

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OBJECTIVES: In order to allocate public resources on health care more efficiently, lump sum based payment systems are introduced in the Belgian hospital sector. This study investigates the influence of pathology-related parameters on the consumption of medical imaging. A regression based method (ANCOVA) is used to define an explanatory model for the expenditure on medical imaging. METHODS: A representative sample of 30 hospitals was withdrawn from the national data. This sample contains 277,321 inpatient stays (19% of total), all of which related to data on utilisation of resources as well as data concerning the pathology. The pathology-related